# 121 000256714

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



100391985431

08/05/22--01007--017 \*\*25.00

2022 AUG - 5 AM 11: 41
SECHETANISEE FI

### **COVER LETTER**

TO: Registration Section Division of Corporations

SUBJECT: Rocket To The Moon LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L21000256714	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne following:
United States Corporation Agents, Inc.	
Name of Person	
Legalzoom.com, Inc.	
Name of Firm/Company	
9900 Spectrum Dr.	
Address	
Austin, TX 78717	
City/State and Zip Code	
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
at (at (	773-0888
Name of Person Area Code	Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

#### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ions of section 605.0115. Florida Statutes, the under	signed.	
United States Corporation Agents, Inc hereby re		haraby raciums as	
		hereby resigns as	
Registered Agent for	Rocket To The Moon LLC		. <u> </u>
	Name of Limited Liability Company	<del></del>	_,
L21000256714			
Document?	Sumber, it known		
A copy of this resignat	ion was mailed to the above listed limited liability c	ompany at its last known address	ŝ.
The agency is terminat	ed and the office discontinued on the 31st day after	the date on which this statement	is filed.
	Signature of Resigning Agent	2022 AUG SENELA TALLA	
If signing on behalf of	an entity:	- 90 -	<del>دستن</del> هدستان هدستان
	Cheyenne Moseley	-5 AL	
	Typed or Printed Name	2) r	Ö
	Asst. Secretary for United States Corporation Age	nts, Inc.	
	Capacity		

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314